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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/651,055	08/28/2003	Rahul Mital	8317-18	8992

7590 12/06/2004

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111 Monument Circle, Suite 3700  
Indianapolis, IN 46204-5137

EXAMINER

TRAN, DIEM T

ART UNIT	PAPER NUMBER
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3748

DATE MAILED: 12/06/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

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<b>Interview Summary</b>	<b>Application No.</b> 10/651,055	<b>Applicant(s)</b> MITAL ET AL.	
	<b>Examiner</b> Diem Tran	<b>Art Unit</b> 3748	

All participants (applicant, applicant's representative, PTO personnel):

(1) Diem Tran. (3) \_\_\_\_\_.

(2) James Durlacher. (4) \_\_\_\_\_.

Date of Interview: 01 December 2004.

Type: a) ☒ Telephonic b) ☐ Video Conference  
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.

If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: \_\_\_\_\_.

Identification of prior art discussed: \_\_\_\_\_.

Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The preliminary amendment filed on 12/24/03 was overlooked by clerical staff. The preliminary amendment has now been entered. Therefore, the last office action is hereby withdrawn and a new office action will follow in due course with a new shortened statutory period.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
Examiner's signature, if required